L23000008353

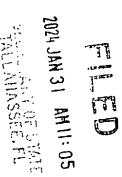
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COVER LETTER

TO: Registration Section Division of Corporations				
Earthr LLC SUBJECT:				
N	ame of Limited	Liability Company		
Dear Sir or Madam:				
The enclosed Registered Agent/Registered C	Office Change an	d fee(s) are submitted for filing.		
Please return all correspondence concerning	this matter to the	e following:		
Shaun Keough				
Name of Person				
Keough Law PLLC			€"	20
Firm/Company			图	24 J <i>t</i>
3505 Lake Lynda Dr. Suite 200				2024 JAN 31 AM 11:05
Address			ASSE U.S. U.E.	2
Orlando, FL 32817			m _i ,	= :
City/State and Zip Code	;		;;	55
skeough@yourtrademarkdefender.com				
E-mail address: (to be used for future a	nnual report not	ification)		
For further information concerning this matter	er, please call:			
Shaun Keough	321 at (262-1146		
Name of Person		Area Code & Daytime Telephone Num	ıber	
Mailing Address: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314		Street Address: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303		
Enclosed is a check for the following	ng amount:			
□ \$25 Filing Fee		\$55 Filing Fee & Certified Copy		

INHS18 (2/14)

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR LIMITED LIABILITY COMPANY

Pursuant to the provisions of sections 605.0114 or 605.0116, Florida Statutes, the undersigned limited liability company submits the following statement in order to change its registered office or registered agent, or both, in the State of Florida.

1.	Na	me of the limited liability company:				_		
2. (a	3895 50th Ave. S., St. Petersburg, FL 33711			(b) 3985 50th Ave. S., St. Petersburg, FL 33711				
(a	· ,	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)			Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)	_		
3.		01/03/2023 Date of filing/registration in Florida		L23000008	353 Document number	_		
5. (a)	Fischer, Tina			: 2 2			
J. (-,	Registered Agent and Registered Office shown on the records of	f the Flori	da Dept. of Stat	2024 JAN 3 I			
		Registered Office Address (MUST BE FLORIDA STREET	ADDRE	<u>22)</u>		Z#		
		433 Central Ave. Suite 401			ζ, ····································	П		
		St. Petersburg , F	L133711		AM II: 06 SEE, FL			
(b) <u> </u>	Shaun Keough			- 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1			
		Enter name of NEW Registered Agent and/or NEW Registere	d Office	address:				
		Keough Law PLLC						
		NEW Registered Office Address:			_			
		3505 Lake Lynda Dт. Suite 200			_			
		Orlando , F.	L32817		_			
chan agen was/	ge t w we	mited liability company is not organized under the la or changes are made, the Florida street address of the ill be identical. Or, in the case of a Florida limited life authorized by an affirmative vote of the members cles of organization or the operating agreement of the	e registe iability of of the li	rred office an company, it is mited liabilit	d the business office of the registered s hereby confirmed that the change(s) y company or as otherwise provided in	e		
	,	1/1/5	Н	enry Barr				
Sig	nat	are of a member or authorized representative of a member			Printed or typed name of signee	_		
provi the o	isie bli ere	y accept the appointment as registered agent and ag ons of all statutes relative to the proper and complete gations of my position as registered agent as provide ly reflect a change in the registered office address, I in writing of this change.	ree to a e perfori ed for in hereby	ct in this cap mance of my Chapter 605 confirm that	acity. I further agree to comply with the duties, and I am familiar with and accep 5, F.S. Or, if this document is being filed the limited liability company has been	it İ		
_/	_	CWC						
Signa	ш	e of Registered Agent						